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STATEMENT OF

FEC FORM 1	ORGANIZATION				Office Use Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
BISHOP PA	C BUIL	DING INFRAS	TRUCTURE HARNE	SSING O	UR PRIORITIES
		PO POY 4007			
ADDRESS (number and street)		PO BOX 1087			
(Check if address is changed)		SOUTHAMPTON		NY 1	1969
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only one mbishop@mcbconsulting	,		
COMMITTEE'S WEB (Check if is change	address	RESS (URL) www.bishoppac.com			
2. DATE 0°	M / D 1	2012			
3. FEC IDENTIFIC	CATION NU	MBER C	C00505636		
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)		
			est of my knowledge and belief it	is true, correct al	nd complete.
Type or Print Name	of Treasurer	Molly Bishop			
Signature of Treasure	er Molly Bi	shop	[Electronically Filed]	Date 01	24 2012
NOTE: Submission of		•	on may subject the person signing th		e penalties of 2 U.S.C. §437g.
Office Use			For further information co Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)